

that flexible spending account. If it rolled over, they could continue to use it for what was really necessary.

That is being limited in the bill. That will be a detriment to people who have some catastrophic things happening to them. Cancer would be one of those things. If they know how much they are going to have to spend on MRIs and CAT scans and other kinds of tests over the coming year, in December they put that amount of money in there, and then they can have this little bit of a tax advantage for taking care of their health care costs.

That is much like big business provides in the much better plans than we have in the Senate.

To conclude, I would like to have a document printed in the RECORD by unanimous consent, which is titled: "A Specific Plan of Action: Lowering Health Care Costs."

I am inserting this on behalf of Senator MCCAIN because people keep claiming that when he ran for President, he said things differently than what is being said now, and with this as part of the RECORD, maybe we can get them to quit saying that. Because he did talk about waste, fraud, and abuse in Medicare and the need to contain it and physician payments and coordinated care and preventable medical errors. So I ask unanimous consent that document be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

A SPECIFIC PLAN OF ACTION: LOWERING
HEALTH CARE COSTS

John McCain Proposes a Number of Initiatives That Can Lower Health Care Costs. If we act today, we can lower health care costs for families through common-sense initiatives. Within a decade, health spending will comprise twenty percent of our economy. This is taking an increasing toll on America's families and small businesses. Even Senators Clinton and Obama recognize the pressure skyrocketing health costs place on small business when they exempt small businesses from their employer mandate plans.

Cheaper Drugs: Lowering Drug Prices. John McCain will look to bring greater competition to our drug markets through safe re-importation of drugs and faster introduction of generic drugs.

Chronic Disease: Providing Quality, Cheaper Care for Chronic Disease. Chronic conditions account for three-quarters of the Nation's annual health care bill. By emphasizing prevention, early intervention, healthy habits, new treatment models, new public health infrastructure and the use of information technology, we can reduce health care costs. We should dedicate more federal research to caring and curing chronic disease.

Coordinated Care: Promoting Coordinated Care. Coordinated care—with providers collaborating to produce the best health care—offers better outcomes at lower cost. We should pay a single bill for high-quality disease care which will make every single provider accountable and responsive to the patients' needs.

Greater Access and Convenience: Expanding Access to Health Care. Families place a high value on quickly getting simple care. Government should promote greater access through walk-in clinics in retail outlets.

Information Technology: Greater Use of Information Technology To Reduce Costs. We should promote the rapid deployment of 21st century information systems and technology that allows doctors to practice across state lines.

Medicaid and Medicare: Reforming the Payment System To Cut Costs. We must reform the payment systems in Medicaid and Medicare to compensate providers for diagnosis, prevention and care coordination. Medicaid and Medicare should not pay for preventable medical errors or mismanagement. Medicare should lead the way in health care reforms that improve quality and lower costs. We need to change the way providers are paid to move away from fragmented care and focus their attention on prevention and coordinated care, especially for those with chronic conditions. This is the most important step in effectively caring for an aging population. We must work in a bipartisan manner to reform the physical payment system, focus efforts on eliminating fraud and move Medicare into a new generation of coordinated, quality care.

Smoking. Promoting the Availability of Smoking Cessation Programs. Most smokers would love to quit but find it hard to do so. Working with business and insurance companies to promote availability, we can improve lives and reduce chronic disease through smoking cessation programs.

State Flexibility: Encouraging States To Lower Costs. States should have the flexibility to experiment with alternative forms of access, coordinated payments per episode covered under Medicaid, use of private insurance in Medicaid, alternative insurance policies and different licensing schemes for providers.

Tort Reform: Passing Medical Liability Reform. We must pass medical liability reform that eliminates lawsuits directed at doctors who follow clinical guidelines and adhere to safety protocols. Every patient should have access to legal remedies in cases of bad medical practice but that should not be an invitation to endless, frivolous lawsuits.

Transparency: Bringing Transparency to Health Care Costs. We must make public more information on treatment options and doctor records, and require transparency regarding medical outcomes, quality of care, costs and prices. We must also facilitate the development of national standards for measuring and recording treatments and outcomes.

CONFRONTING THE LONG-TERM CARE CHALLENGE

John McCain Will Develop a Strategy for Meeting the Challenge of a Population Needing Greater Long-Term Care. There have been a variety of state-based experiments such as Cash and Counseling or the Program of All-Inclusive Care for the Elderly (PACE) that are pioneering approaches for delivering care to people in a home setting. Seniors are given a monthly stipend which they can use to: hire workers and purchase care-related services and goods. They can get help managing their care by designating representatives, such as relatives or friends, to help make decisions. It also offers counseling and bookkeeping services to assist consumers in handling their programmatic responsibilities.

SETTING THE RECORD STRAIGHT: COVERING
THOSE WITH PRE-EXISTING CONDITIONS

Myth: Some claim that under John McCain's plan, those with pre-existing conditions would be denied insurance.

Fact: John McCain supported the Health Insurance Portability and Accountability Act in 1996 that took the important step of providing some protection against exclusion of pre-existing conditions.

Fact: Nothing in John McCain's plan changes the fact that if you are employed and insured you will build protection against the cost of any pre-existing condition.

Fact: As President, John McCain would work with governors to find the solutions necessary to ensure those with pre-existing conditions are able to easily access care.

Mr. ENZI. I hope, on future appropriations—I hope when the President gets this bill, if it makes it through the process—and it appears as though it should easily do that—he will veto the bill and send it back because the 5,224 earmarks, amounting to \$3.8 billion—instead of talking about 5 percent of what the Cabinet members expend, it might be more valuable to talk about \$3.8 billion.

There are other things that need to be done. We do need to start being fiscally responsible. Of course, one of the questions is: Why haven't we been, in the past, fiscally responsible? That answer to that is, we did not have our credit cards maxed out before. We were able to print the money and nobody noticed. But now when we print the money, people do notice. So we have both the end of the year appropriations—the end of the year, incidentally, was the last day of September, and we are doing them now—and we have this health care crisis to solve. There is not anybody who does not want to come up with a solution to it. But we want to do it step by step and get the confidence of the American people.

The American people do not have confidence in what we are doing. I have several documents that would show what percentage of the people do not agree we are doing the right thing. That ought to get the attention in virtually every State because it is not just as a national whole, it is in every State. People have figured out what we are trying to do, and they do not think we are doing it right. We better get it right or people will be even more upset.

I yield floor.

ADJOURNMENT UNTIL 1:30 P.M.
TOMORROW

The PRESIDING OFFICER. Under the previous order, the Senate stands adjourned until 1:30 p.m. tomorrow.

Thereupon, the Senate, at 4:17 p.m., adjourned until Sunday, December 13, 2009, at 1:30 p.m.